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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT**

Application Number	10/058,151
Filing Date	1-25-02
First Named Inventor	HORNBY
Group Art Unit	1655
Examiner Name	
Attorney Docket Number	P-692

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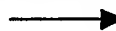
To: Assistant Commissioner for Patents
Washington, DC 20231**RECEIVED**

DEC 31 2002

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Termination of employment with Transgenomic, Inc.

TECH CENTER 600/2900
APPROVED*William J. Blum*
6 PM 12-16-02
11/4/031. ☐ The correspondence address is NOT affected by this withdrawal.2. ☒ Change the correspondence address and direct all future correspondence to: _____**CORRESPONDENCE ADDRESS**☐ Customer NumberPlace Customer Number
Bar Code Label here

OR

☒ Firm or
Individual NameKeith Johnson, Esq.
Transgenomic, Inc.
12325 Emmett Street
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☒ This request is made on behalf of myself and☐ all the attorneys/agents of record,☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or☐ the attorneys/agents associated with Customer Number _____

This request is enclosed in triplicate (including any attachments).

Name

John F. Brady

Reg. No. 39,118

Signature

John F. Brady

Date

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NOTE: Withdrawal is effective when approved rather than when received.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.